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| PATENT APPLICATION FEE DETERMINATION RECORD<br>Substitute for Form PTO-875   |   |                                    |               |  | Application or Docket Number<br><b>09/397920</b> |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
|--|---|------------------------------------|---------------|--|--|--|--|----------------------------------|------------------------------------|---------------|---------------------------|----|-------|-----|---------------------------------|----|-------|-----|---|--|--|--|--------------|-------------------------|------|------|----------------|----------------|--------------|--------------|--------------|--------------|--------------|--------------|-------|-------|-----------|-----------|
| <b>CLAIMS AS FILED - PART I</b><br><div style="display: flex; justify-content: space-around;"> <span>(Column 1)</span> <span>(Column 2)</span> </div>  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| FOR  | NUMBER FILED  | NUMBER EXTRA                       |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| BASIC FEE<br>(37 CFR 1.16(a))  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| TOTAL CLAIMS<br>(37 CFR 1.16(c))   | minus 20 =  | •                                  |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(b))   | minus 3 =   | •                                  |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| <b>CLAIMS AS AMENDED - PART II</b><br><div style="display: flex; justify-content: space-around;"> <span>(Column 1)</span> <span>(Column 2)</span> <span>(Column 3)</span> </div>   |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| AMENDMENT  | CLAIMS REMAINING AFTER AMENDMENT                                | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
|  | Total<br>(37 CFR 1.16(a))                                       | Minus                              | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
|  | Independent<br>(37 CFR 1.16(b))                                 | Minus                              | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
|  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
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|  | CLAIMS REMAINING AFTER AMENDMENT                                | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Total<br>(37 CFR 1.16(a))  | 22  | 22                                 | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Independent<br>(37 CFR 1.16(b))  | 14  | 14                                 | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| SMALL ENTITY   | OTHER THAN SMALL ENTITY   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| RATE   | RATE  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| FEE  | FEE   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| + \$ _____ =   | + \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| TOTAL  | TOTAL   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| ADD'L FEE  | ADD'L FEE   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
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|  | CLAIMS REMAINING AFTER AMENDMENT                                | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Total<br>(37 CFR 1.16(a))  | 22  | 22                                 | = 0           |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Independent<br>(37 CFR 1.16(b))  | 14  | 14                                 | = 0           |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| SMALL ENTITY   | OTHER THAN SMALL ENTITY   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| RATE   | RATE  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| ADDITIONAL FEE   | ADDITIONAL FEE  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| + \$ _____ =   | + \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| TOTAL  | TOTAL   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| ADD'L FEE  | ADD'L FEE   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
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|  | CLAIMS REMAINING AFTER AMENDMENT                                | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Total<br>(37 CFR 1.16(a))  | •   | Minus                              | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| Independent<br>(37 CFR 1.16(b))  | •   | Minus                              | =             |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| SMALL ENTITY   | OTHER THAN SMALL ENTITY   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| RATE   | RATE  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| ADDITIONAL FEE   | ADDITIONAL FEE  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| X \$ _____ =   | X \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| + \$ _____ =   | + \$ _____ =  |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| TOTAL  | TOTAL   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |
| ADD'L FEE  | ADD'L FEE   |                                    |               |  |  |  |  |                                  |                                    |               |                           |    |       |     |                                 |    |       |     |   |  |  |  |              |                         |      |      |                |                |              |              |              |              |              |              |       |       |           |           |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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